

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number. (Optional)  
226272001403



In re Application of  
James M. ALLEN

#14/E.O.T  
1 mo.

Application Number  
09/731,941

Filed  
December 6, 2000

For  
PACKAGING CELL LINES FOR GENERATION OF HIGH TITERS OF  
RECOMBINANT AAV VECTORS

Group Art Unit  
1635

Examiner  
B. Whiteman

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

☒ One month (37 CFR 1.17(a)(1))

\$110.00

☐ Two months (37 CFR 1.17(a)(2))

\$ \_\_\_\_\_

☐ Three months (37 CFR 1.17(a)(3))

\$ \_\_\_\_\_

☐ Four months (37 CFR 1.17(a)(4))

\$ \_\_\_\_\_

☐ Five months (37 CFR 1.17(a)(5))

\$ \_\_\_\_\_

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☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$55.00.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952. I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

March 5, 2003

*Catherine M. Polizzi*  
Signature

03/1/2003 YPOLITE1 00000028 031952 09731941  
01 C:2251 55.00 CH

Catherine M. Polizzi  
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.